NO. 10/701,165.

RECEIVED
CENTRAL FAX CENTER

DEC 2 3 2005

255 South Orange Avenue • Suite 1401 • Orlando, FL 32801 Mail to: P.O. Box 3791 • Orlando, FL 32802-3791 tel: 407-841-2330 • fax: 407-841-2343

FACSIMILE COVER SHEET

TO: EXAMINER SAMUEL A. GEBREMARIAM (ART UNIT 2811)
CLIENT NUMBER: 54231
TELEPHONE: <u>571-272-1653</u> FAX: <u>571-273-8300</u>
FROM: PAUL J. DITMYER, ESO.
DATE: December 23, 2005
NUMBER OF PAGES (INCLUDING COVER SHEET): 18
COMMENTS/INSTRUCTIONS:
PLEASE SEE ATTACHED AMENDMENT AFTER FINAL RESPONSIVE TO EXAMINER'S OFFICE ACTION MAILED AUGUST 24, 2005 FOR APPLICATION SERIAL

NOTE: The information in this facsimile transmission is intended only for the personal and confidential use of the designated recipient(s) named above. This message may be an attorney-client communication and as such is privileged.

If the reader of this message is not the intended recipient named above, you are notified that you have received this document in error, and any review, dissemination, distribution or copying of this message is strictly prohibited.

If you have received this document in error, please notify this office immediately via telephone, and return the original message to the above address by mail. Thank you.

IF YOU DO NOT RECEIVE ALL OF THE PAGES OR ENCOUNTER DIFFICULTIES IN TRANSMISSION, PLEASE CONTACT THE RECEPTIONIST IMMEDIATELY AT (407) 841-2330 Case No. 02GR09854488

MS AMENDMENT COMMISSIONER FOR PATENTS P.O. BOX 1450 ALEXANDRIA, VA 22313-1450

In re Application of:

MORIN ET AL.

Serial No.:

10/701,165

Confirmation No.:

5541

Filed:

November 4, 2003

For:

SEMICONDUCTOR DEVICE WITH MOS TRANSISTORS WITH AN

ETCH-STOP LAYER HAVING AN IMPROVED RESIDUAL STRESS

LEVEL AND METHOD FOR FABRICATING SUCH A

SEMICONDUCTOR DEVICE

Sir.

Transmitted herewith is an amendment in the above-identified application.

[] Applicant qualifies as a small entity under 37 CFR § 1.27.

[X] No additional fee is required.

The fee has been calculated as shown below:

FOR:	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Cal. 3) PRESENT EXTRA	SMALL ENTITY		LARGE ENTITY	
				RATE	FEE	RATE	FEE
TOTAL CLAIMS	27	27	0	X25	\$	X50	\$
INDEPT CLAIMS	3	3	o	X100	\$	X200	\$
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	\$

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 If the "Highest Number Previously Paid For. IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.
- The Commissioner is hereby authorized to charge or credit any discrepancies in fee amounts to Deposit Account No. 01-0484.
- [X] PLEASE ADDRESS ALL CORRESPONDENCE TO ATTORNEY OF RECORD: CHRISTOPHER F. REGAN
- [X] Please associate this application with Customer No. 27975.

<u>December 23, 2005</u>

DATE

REG. NO. 40,455